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2013

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

- Do not enter Social Security numbers on this form as it may be made public.
- Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public
Inspection

A For the 2013 calendar year, or tax year beginning 7/01, 2013, and ending 6/30, 2014

B Check if applicable	C Foundation at NJ Institute of Technology University Heights Newark, NJ 07102-1982				D Employer Identification Number 22-1714037		
	<input type="checkbox"/> Address change					E Telephone number (973) 596-5279	
	<input type="checkbox"/> Name change						
	<input type="checkbox"/> Initial return						
	<input type="checkbox"/> Terminated						
<input type="checkbox"/> Amended return							
<input type="checkbox"/> Application pending					G Gross receipts \$ 41,467,955.		
F Name and address of principal officer Dees Jr. Charles R Same As C Above					H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
					H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'No,' attach a list (see instructions)		
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527					H(c) Group exemption number ►		
J Website: ► N/A							
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►					L Year of formation 1959 M State of legal domicile NJ		

Part II Summary

1 Briefly describe the organization's mission or most significant activities Foundation at New Jersey Institute of Technology is a resource development organization that raises and manages funds to support the further development and growth of programs at New Jersey Institute of Technology.

2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a) 3 44

4 Number of independent voting members of the governing body (Part VI, line 1b) 4 38

5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 0

6 Total number of volunteers (estimate if necessary) 6 38

7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0.

b Net unrelated business taxable income from Form 990-T, line 34 7b 0.

RECEIVED

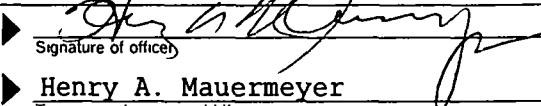
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		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	10,833,702.	9,798,205.
9	Program service revenue (Part VIII, line 2g)		
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10,549,986.	4,481,112.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-188,289.	-171,857.
12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	13,643,999.	14,107,460.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	5,294,549.	5,571,813.
14	Benefits paid to or for members (Part IX, column (A), line 4)		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
16a	Professional fundraising fees (Part IX, column (A), line 11e)	94,547.	78,517.
b	Total fundraising expenses (Part IX, column (D), line 25) ► 1,872,120.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,242,450.	2,472,177.
18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	7,631,546.	8,122,507.
19	Revenue less expenses Subtract line 18 from line 12	6,012,453.	5,984,953.
20	Total assets (Part X, line 16)	Beginning of Current Year 87,281,387.	End of Year 101,559,676.
21	Total liabilities (Part X, line 26)	2,004,605.	1,117,682.
22	Net assets or fund balances. Subtract line 21 from line 20	85,276,782.	100,441,994.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here ►  Date 5/15/15

► Henry A. Mauermeyer Asst Treasurer&Secr

Signature of officer

Type or print name and title

Paid Preparer Use Only	Print/Type preparer's name [REDACTED]	Preparer's signature Self-Prepared	Date	Check <input type="checkbox"/> if self-employed	PTIN [REDACTED]
	Firm's name ► [REDACTED]	Firm's EIN ► [REDACTED]			
	Firm's address ► [REDACTED]	Phone no [REDACTED]			

May the IRS discuss this return with the preparer shown above? (see instructions)

BAA For Paperwork Reduction Act Notice, see the separate instructions.

TEEA0113L 11/08/13

Form 990 (2013)

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Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III 1 Briefly describe the organization's mission

Foundation at New Jersey Institute of Technology is a resource development organization that raises and manages funds to support the further development and growth of programs at New Jersey Institute of Technology.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

If 'Yes,' describe these new services on Schedule O

 Yes No3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

If 'Yes,' describe these changes on Schedule O.

 Yes No4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code: _____) (Expenses \$ 3,078,810. including grants of \$ 3,078,810.) (Revenue \$ _____)
Scholarship and fellowship grants were awarded to New Jersey Institute of Technology.

4b (Code: _____) (Expenses \$ 844,958. including grants of \$ 844,958.) (Revenue \$ _____)
Instructional grants totaling \$844,958 were awarded to New Jersey Institute of Technology in support of its educational programs including a capital grant of \$472,416, computer science program grants of \$126,168, chair and professorship grants of \$103,752, engineering program grants of \$73,762, School of Management program grants of \$52,030, and other program grants of \$16,830.

4c (Code: _____) (Expenses \$ 473,512. including grants of \$ 473,512.) (Revenue \$ _____)
Public service grants totaling \$473,512 were awarded to New Jersey Institute of Technology to support community services, pre-college and other programs.

4d Other program services. (Describe in Schedule O) See Schedule O

(Expenses \$ 1,174,533. including grants of \$ 1,174,533.) (Revenue \$ _____)

)

4e Total program service expenses ► 5,571,813.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1 X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3 X	
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4 X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5 X	
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6 X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7 X	
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8 X	
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9 X	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10 X	
11 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a X	
b Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b X	
c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c X	
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d X	
e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13 X	
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15 X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16 X	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17 X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18 X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19 X	
20a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20 X	
b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b X	

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II ..	21	X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III ..	22	X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J ..	23	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No,' go to line 25a	24a	X
24b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
24c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
24d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I ..	25a	X
25b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b	X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
28a	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	28a	X
28b	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b	X
28c	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33	X
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34	X
35a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	X

BAA

Form 990 (2013)

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1 a	0		
1 b	0		
c		1 c	
2 a	0		
b		2 b	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a	X		
b		3 b	
4 a	X		
b			
5 a	X		
b		5 b	X
c		5 c	
6 a	X		
b		6 b	
7 Organizations that may receive deductible contributions under section 170(c).			
a		7 a	X
b		7 b	X
c		7 c	X
d		7 d	
e		7 e	X
f		7 f	X
g		7 g	
h		7 h	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8	
9 Sponsoring organizations maintaining donor advised funds.		9 a	
a		9 b	
10 Section 501(c)(7) organizations. Enter.			
a		10 a	
b		10 b	
11 Section 501(c)(12) organizations. Enter:			
a		11 a	
b		11 b	
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12 a	
b		12 b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a		13 a	
Note. See the instructions for additional information the organization must report on Schedule O.			
b		13 b	
c		13 c	
14 a Did the organization receive any payments for indoor tanning services during the tax year?		14 a	X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O		14 b	

Part VI: Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI.

Section A. Governing Body and Management

		Yes	No
1 a	44		
1 b	38		
2		X	
3		X	
4		X	
5		X	
6		X	
7 a		X	
7 b		X	
8 a	X		
8 b	X		
9		X	

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10 a	X	
10 b		
11 a	X	
11 b		
12 a	X	
12 b	X	
12 c	X	
13	X	
14	X	
15		
15 a	X	
15 b	X	
16 a	X	
16 b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► NJ

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available Check all that apply.

Own website Another's website Upon request Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year See Schedule O

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

► William S. Garcia, NJIT, University Heights, Newark NJ 07102-1982 973-596-5279

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors
 Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid

- List all of the organization's **current** key employees, if any. See instructions for definition of 'key employee'

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors, institutional trustees; officers; key employees; highest compensated employees, and former such persons.

 Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C)				(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099 MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Former director or individual trustee	Institutional trustee	Officer	Key employee Highest compensated			
(1) Rinaldi, Philip L. Chairman	1 0	X		X		0.	0.	0.
(2) Dees Jr. Charles R President & COO	17.5 17.5	X		X		0.	317,617.	21,990.
(3) Mauermeyer, Henry A. Asst Treas&Secr	3 32	X		X		0.	348,152.	13,288.
(4) Bloom, Joel S. Overseer	1 34	X				0.	657,968.	28,149.
(5) Bowles III, Richard S. Overseer	1 0	X				0.	0.	0.
(6) Clayton, Norma J. Overseer	1 0	X				0.	0.	0.
(7) Annunziato, Steven Overseer	1 0	X				0.	0.	0.
(8) Denehy, Paul A. Overseer	1 0	X				0.	0.	0.
(9) DeNichilo, Nicholas M. Overseer	1 0	X				0.	0.	0.
(10) Dickens, Rodney L. Overseer	1 0	X				0.	0.	0.
(11) Dominguez, Carlos Overseer	1 0	X				0.	0.	0.
(12) Dorman, Albert A. Overseer	1 0	X				0.	0.	0.
(13) Dorros, Irwin Overseer	1 0	X				0.	0.	0.
(14) Drexler, Jerome Overseer	1 0	X				0.	0.	0.

Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Officer or director	Individual trustee	Key employee	Former highest compensated employee			
(15) Freyer DeSouza, Caren L. Overseer	1 0	X				0.	0.	0.
(16) Wall, Michael A (thru 3/2014) Exec Vice Chair	1 0	X	X			0.	0.	0.
(17) Herkert, Emil C. Overseer	1 0	X				0.	0.	0.
(18) Hallerdin, Michelle Overseer	1 0	X				0.	0.	0.
(19) Hillier, J. Robert Overseer	1 0	X				0.	0.	0.
(20) McGowan, Patrick J. Overseer	1 0	X				0.	0.	0.
(21) McGowan, Raymond J. Overseer	1 0	X				0.	0.	0.
(22) Medeiros, James G. Overseer	1 0	X				0.	0.	0.
(23) Naimoli, Vincent Overseer	1 0	X				0.	0.	0.
(24) Nallin, John J. Overseer	1 0	X				0.	0.	0.
(25) Newcombe, George M. Overseer	1 0	X				0.	0.	0.
1 b Sub-total						0.	1,323,737.	63,427.
c Total from continuation sheets to Part VII, Section A						0.	884,606.	80,674.
d Total (add lines 1b and 1c)						0.	2,208,343.	144,101.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 0

	Yes	No
3		X
4		
5	X	

3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 0

Continuation Sheet for Form 990

2013

Department of the Treasury
Internal Revenue Service

Name of the Organization

Foundation at NJ Institute of Technology

Employer identification number

22-1714037

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week (list any hours for related organi- zations below dotted line)	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
		Or director	Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated			
(26) Olson, John H.	1									
Overseer	0	X						0.	0.	0.
(27) Deek, Fadi	1									
Overseer	34	X						0.	320,966.	13,532.
(28) Henderson, Daniel A.	1									
Overseer	0	X						0.	0.	0.
(29) Seazholtz, John W.	1									
Overseer	0	X						0.	0.	0.
(30) Sebastian, Donald H.	1									
Overseer	34	X						0.	302,955.	36,039.
(31) Smith, Gregory M.	1									
Overseer	0	X						0.	0.	0.
(32) Tonic, Stephanie	1									
Overseer	0	X						0.	0.	0.
(33) Tuchman, Martin	1									
Overseer	0	X						0.	0.	0.
(34) Kapoor, Arthur A.	1									
Overseer	0	X						0.	0.	0.
(35) Levin, Robert J.	1									
Overseer	0	X						0.	0.	0.
(36) Fey, Charles J.	1									
Overseer	34	X						0.	260,685.	31,103.
(37) Gockel, David T.	1									
Overseer	0	X						0.	0.	0.
(38) Perry, Marjorie A.	1									
Overseer	0	X						0.	0.	0.
(39) Maser, Richard M.	1									
Overseer	0	X						0.	0.	0.
(40) Masucci, Nicholas J.	1									
Overseer	0	X						0.	0.	0.
(41) McCann, John	1									
Overseer	0	X						0.	0.	0.
(42) Medina, Robert	1									
Overseer	0	X						0.	0.	0.
(43) Sauter, Gregory	1									
Overseer	0	X						0.	0.	0.
(44) Spratt, Regina M.	1									
Overseer	0	X						0.	0.	0.
(45) West, Carlton R.	1									
Overseer	0	X						0.	0.	0.

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns	1a			
	b Membership dues	1b			
	c Fundraising events	1c	531,539.		
	d Related organizations	1d			
	e Government grants (contributions)	1e			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	9,266,666.		
	g Noncash contributions included in lines 1a-1f		\$ 1,247,566.		
h Total. Add lines 1a-1f		► 9,798,205.			
PROGRAM SERVICE REVENUE	Business Code				
	2a				
	b				
	c				
	d				
	e				
	f All other program service revenue				
g Total. Add lines 2a-2f		►			
3	Investment income (including dividends, interest and other similar amounts)		► 1,838,696.		1,838,696.
4	Income from investment of tax-exempt bond proceeds		►		
5	Royalties		► 19,707.		19,707.
6a	Gross rents	(i) Real	(ii) Personal		
b	Less rental expenses				
c	Rental income or (loss)				
d	Net rental income or (loss)		►		
7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
		29664536.			
b	Less: cost or other basis and sales expenses	27022120.			
c	Gain or (loss)	2,642,416.			
d	Net gain or (loss)		► 2,642,416.		2,642,416.
8a	Gross income from fundraising events (not including \$ 531,539. of contributions reported on line 1c)				
	See Part IV, line 18	a 119,611.			
b	Less: direct expenses	b 323,754.			
c	Net income or (loss) from fundraising events		► -204,143.		-204,143.
9a	Gross income from gaming activities	a 27,200.			
	See Part IV, line 19	b 14,621.			
b	Less: direct expenses				
c	Net income or (loss) from gaming activities		► 12,579.		12,579.
10a	Gross sales of inventory, less returns and allowances	a			
b	Less: cost of goods sold	b			
c	Net income or (loss) from sales of inventory		►		
11a	Miscellaneous Revenue	Business Code			
b					
c					
d	All other revenue				
e	Total. Add lines 11a-11d		►		
12 Total revenue. See instructions		► 14,107,460.	0.	0.	4,309,255.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	5,571,813.	5,571,813.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 Benefits paid to or for members	0.	0.	0.	0.
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	31,133.		27,980.	3,153.
d Lobbying				
e Professional fundraising services. See Part IV, line 17	78,517.			78,517.
f Investment management fees	460,860.		460,860.	
g Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	27,877.		27,877.	
12 Advertising and promotion	1,628.			1,628.
13 Office expenses	709.			709.
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	17,200.			17,200.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	31,984.		498.	31,486.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <u>Reimbursed payroll expenses</u>	1,900,636.		161,334.	1,739,302.
b <u>Dues & memberships</u>	150.		25.	125.
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	8,122,507.	5,571,813.	678,574.	1,872,120.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year	(B) End of year
ASSETS	1 Cash – non-interest-bearing	1	
	2 Savings and temporary cash investments	3,680,502.	2,296,709.
	3 Pledges and grants receivable, net	630,114.	1,014,153.
	4 Accounts receivable, net	8,111.	9,513.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	6	
	7 Notes and loans receivable, net	7	
	8 Inventories for sale or use	8	
	9 Prepaid expenses and deferred charges	21,662.	25,942.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	
	b Less accumulated depreciation	10b	10c
	11 Investments – publicly traded securities	64,434,113.	76,804,048.
	12 Investments – other securities See Part IV, line 11	18,490,796.	21,393,222.
	13 Investments – program-related. See Part IV, line 11.	13	
	14 Intangible assets	14	
	15 Other assets. See Part IV, line 11	16,089.	16,089.
	16 Total assets. Add lines 1 through 15 (must equal line 34)	87,281,387.	101,559,676.
LIABILITIES	17 Accounts payable and accrued expenses	17	1,576.
	18 Grants payable	18	
	19 Deferred revenue	19	
	20 Tax-exempt bond liabilities	20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	22	
	23 Secured mortgages and notes payable to unrelated third parties	23	
	24 Unsecured notes and loans payable to unrelated third parties	24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	2,004,605.	1,116,106.
	26 Total liabilities. Add lines 17 through 25	2,004,605.	1,117,682.
	NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.	
	27 Unrestricted net assets ..	27	
	28 Temporarily restricted net assets	28	
	29 Permanently restricted net assets	29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 30 through 34.		
	30 Capital stock or trust principal, or current funds	12,200,655.	13,826,907.
	31 Paid-in or capital surplus, or land, building, or equipment fund	31	
	32 Retained earnings, endowment, accumulated income, or other funds	73,076,127.	86,615,087.
	33 Total net assets or fund balances	33	100,441,994.
	34 Total liabilities and net assets/fund balances	34	101,559,676.

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Form 990 (2013)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI

1 Total revenue (must equal Part VIII, column (A), line 12)	1	14,107,460.
2 Total expenses (must equal Part IX, column (A), line 25)	2	8,122,507.
3 Revenue less expenses Subtract line 2 from line 1	3	5,984,953.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	85,276,782.
5 Net unrealized gains (losses) on investments	5	9,756,938.
6 Donated services and use of facilities ..	6	
7 Investment expenses	7	
8 Prior period adjustments ..	8	
9 Other changes in net assets or fund balances (explain in Schedule O) See Schedule O	9	-576,679.
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	100,441,994.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____		
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:		
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
2b Were the organization's financial statements audited by an independent accountant?	2b	X
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both		
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
2c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	

BAA

Form 990 (2013)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

**Open to Public
Inspection**

Name of the organization

Foundation at NJ Institute of Technology

Employer identification number

22-1714037

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1 A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i)**.
 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
 9 An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III – Functionally integrated d Type III – Non-functionally integrated
 e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
 f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box
 g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
11g (i)		
11g (ii)		
11g (iii)		

h Provide the following information about the supported organization(s).

(I) Name of supported organization	(II) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in column (I) listed in your governing document?		(v) Did you notify the organization in column (I) of your support?		(vi) Is the organization in column (I) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants')	6,757,036.	5,658,824.	6,845,109.	8,337,302.	9,798,205.	37,396,476.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 Total. Add lines 1 through 3	6,757,036.	5,658,824.	6,845,109.	8,337,302.	9,798,205.	37,396,476.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						8,495,135.
6 Public support. Subtract line 5 from line 4						28,901,341.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	6,757,036.	5,658,824.	6,845,109.	8,337,302.	9,798,205.	37,396,476.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,259,920.	1,248,567.	1,674,386.	1,749,261.	1,858,403.	7,790,537.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) See Part IV	105,377.	165,914.	90,752.	136,441.	146,811.	645,295.
11 Total support. Add lines 7 through 10						45,832,308.
12 Gross receipts from related activities, etc (see instructions)					12	0.

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ **Section C. Computation of Public Support Percentage**

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	63.06%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	61.15%

16a 33-1/3% support test – 2013. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ b 33-1/3% support test – 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ 17a 10%-facts-and-circumstances test – 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ b 10%-facts-and-circumstances test – 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants.')						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total Support. (Add Ins 9,10c, 11 and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						▶ <input type="checkbox"/>

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	%
19a 33-1/3% support tests – 2013. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	▶ <input type="checkbox"/>	
b 33-1/3% support tests – 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	▶ <input type="checkbox"/>	
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	▶ <input type="checkbox"/>	

Part IV

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service
Name of the organization**Supplemental Financial Statements**► Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

OMB No 1545-0047

2013**Open to Public
Inspection**

Employer identification number

Foundation at NJ Institute of Technology

22-1714037

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).	
<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year	
a Total number of conservation easements	Held at the End of the Tax Year
b Total acreage restricted by conservation easements	2a
c Number of conservation easements on a certified historic structure included in (a)	2b
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2c
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►	2d
4 Number of states where property subject to conservation easement is located ►	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►	
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$	
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.	
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:	
(i) Revenues included in Form 990, Part VIII, line 1	► \$
(ii) Assets included in Form 990, Part X	► \$
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
a Revenues included in Form 990, Part VIII, line 1	► \$
b Assets included in Form 990, Part X	► \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a Public exhibition
 b Scholarly research
 c Preservation for future generations

d Loan or exchange programs
 e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If 'Yes,' explain the arrangement in Part XIII and complete the following table:

	Amount
1 c	
1 d	
1 e	
1 f	

2 a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.

Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance	82,924,909.	74,513,372.	75,581,820.	64,526,888.	57,741,867.
b Contributions	4,812,938.	4,559,145.	4,447,935.	1,900,881.	4,062,520.
c Net investment earnings, gains, and losses	14,187,926.	7,662,908.	-1,840,142.	12,562,006.	6,005,155.
d Grants or scholarships	3,038,636.	2,962,856.	2,823,110.	2,160,300.	2,057,370.
e Other expenditures for facilities and programs	225,855.	468,478.	555,985.	950,037.	915,553.
f Administrative expenses	464,012.	379,182.	297,146.	297,618.	309,731.
g End of year balance	98,197,270.	82,924,909.	74,513,372.	75,581,820.	64,526,888.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ► 14.00 %

b Permanent endowment ► 86.00 %

c Temporarily restricted endowment ► %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) unrelated organizations
 (ii) related organizations

b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds. See Part XIII

	Yes	No
3a(i)	X	
3a(ii)		X
3b		

Part VI Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ► 0.

BAA

Schedule D (Form 990) 2013

Part VII Investments – Other Securities.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other <u>Hedge and other funds</u>	21,393,222.	End of Year Market Value
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12)	21,393,222.	

Part VIII Investments – Program Related.

N/A

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13)		

Part IX Other Assets.

N/A

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, column (B), line 15.)	

Part X Other Liabilities.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) <u>Charitable remainder unitrusts</u>	705,293.
(3) <u>Gift annuity funds</u>	410,813.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	1,116,106.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1 Total revenue, gains, and other support per audited financial statements.	1	24,030,308.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments	2a	9,316,141.
b Donated services and use of facilities	2b	
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIII.)	2d	
e Add lines 2a through 2d	2e	9,316,141.
3 Subtract line 2e from line 1	3	14,714,167.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	-432,537.
b Other (Describe in Part XIII.) See Part XIII	4b	-174,170.
c Add lines 4a and 4b	4c	-606,707.
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	14,107,460.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1 Total expenses and losses per audited financial statements	1	8,000,022.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities	2a	
b Prior year adjustments	2b	
c Other losses	2c	
d Other (Describe in Part XIII.) See Part XIII	2d	338,375.
e Add lines 2a through 2d	2e	338,375.
3 Subtract line 2e from line 1	3	7,661,647.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1.		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	432,537.
b Other (Describe in Part XIII.) See Part XIII	4b	28,323.
c Add lines 4a and 4b	4c	460,860.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	8,122,507.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b, Part V, line 4; Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Part V, Line 4 - Intended Uses Of Endowment Fund

Foundation at New Jersey Institute of Technology uses the realized income and

appreciation on its endowment investments for the purposes specified by the donors in

their gift documents or as designated by its Board of Overseers for quasi endowments,

in order to support the further development and growth of programs at New Jersey

Institute of Technology.

**Schedule F
(Form 990)**Department of the Treasury
Internal Revenue Service**Statement of Activities Outside the United States**

- Complete if the organization answered 'Yes' on Form 990, Part IV, line 14b, 15, or 16.
- Attach to Form 990. ► See separate instructions.
- Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013Open to Public
Inspection

Name of the organization

Foundation at NJ Institute of Technology

Employer identification number

22-1714037

Part I General Information on Activities Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 14b.

- 1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) **Part V**

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
Central America (1) & Caribbean			Investments		12,893,511.
(2) Europe			Investments		4,277,763.
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total					17,171,274.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	0	0			17,171,274.

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2013

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ► 0

3 Enter total number of other organizations or entities ► 0

BAA

Schedule F (Form 990) 2013

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

BAA

Part IV Foreign Forms

1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 926, *Return by a U.S. Transferor of Property to a Foreign Corporation* (see Instructions for Form 926) Yes No

2 Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be required to file Form 3520, *Annual Return To Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts*, and/or Form 3520-A *Annual Information Return of Foreign Trust With a U.S. Owner* (see Instructions for Forms 3520 and 3520-A) Yes No

3 Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, *Information Return of U.S. Persons With Respect To Certain Foreign Corporations*. (see Instructions for Form 5471) Yes No

4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If 'Yes,' the organization may be required to file Form 8621, *Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund* (see Instructions for Form 8621) Yes No

5 Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, *Return of U.S. Persons With Respect To Certain Foreign Partnerships* (see Instructions for Form 8865) Yes No

6 Did the organization have any operations in or related to any boycotting countries during the tax year? If 'Yes,' the organization may be required to file Form 5713, *International Boycott Report* (see Instructions for Form 5713) Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Part I - Additional Supplemental Information

Foundation at New Jersey Institute of Technology (Foundation) invests in domestic and foreign limited partnerships that may own an interest in a foreign corporation or partnership. Nevertheless, the investments in these partnerships may not have reached the threshold required for filing Forms 926, 5471, or 8865. To the extent those forms are required to be filed, they are attached to the Foundation's Form 990-T.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

**Supplemental Information Regarding
Fundraising or Gaming Activities**

OMB No 1545-0047

2013

**Open to Public
Inspection**

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
 ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.
 ► Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

Foundation at NJ Institute of Technology

Employer identification number

22-1714037

Part I Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17
 Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a <input checked="" type="checkbox"/> Mail solicitations	e <input checked="" type="checkbox"/> Solicitation of non-government grants
b <input checked="" type="checkbox"/> Internet and email solicitations	f <input type="checkbox"/> Solicitation of government grants
c <input checked="" type="checkbox"/> Phone solicitations	g <input checked="" type="checkbox"/> Special fundraising events
d <input checked="" type="checkbox"/> In-person solicitations	

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
1 Silver Lining Hasbrouck Heights NJ 07604	Consulting Svc	Yes	No	29,550.	
			X		
2 Blackbaud PO Box 930256 Atlanta GA 31193	Consulting Svc		X	16,250.	
3 Dun&Bradstreet Chicago IL 60675	Consulting Svc		X	15,400.	
4 Ruffalocody Cedar Rapids IA 52406	Telemarket Plan		X	15,331.	
5					
6					
7					
8					
9					
10					
Total				76,531.	0.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

NJ NY CA FL MD

Part II **Fundraising Events.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

REVENUE		(a) Event #1 Annual Celebra (event type)	(b) Event #2 Athletic Golf (event type)	(c) Other events 4 (total number)	(d) Total events (add column (a) through column (c))
	1 Gross receipts	355,100.	171,675.	124,375.	651,150.
	2 Less: Charitable contributions	308,314.	115,445.	107,780.	531,539.
	3 Gross income (line 1 minus line 2)	46,786.	56,230.	16,595.	119,611.
DIRECT EXPENSES	4 Cash prizes				
	5 Noncash prizes		20,223.		20,223.
	6 Rent/facility costs	63,108.	68,842.	10,113.	142,063.
	7 Food and beverages			27,816.	27,816.
	8 Entertainment	78,533.		750.	79,283.
	9 Other direct expenses	25,017.	12,511.	16,841.	54,369.
	10 Direct expense summary Add lines 4 through 9 in column (d)	.....			323,754.
	11 Net income summary. Subtract line 10 from line 3, column (d)	....	....	....	-204,143.

Part III **Gaming.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

REVENUE		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
	1 Gross revenue			27,200.	27,200.
DIRECT EXPENSES	2 Cash prizes			13,150.	13,150.
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses			1,471.	1,471.
	6 Volunteer labor	Yes 0 % <input checked="" type="checkbox"/> No	Yes 0 % <input checked="" type="checkbox"/> No	Yes 0 % <input checked="" type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d)	....	....	....	14,621.
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)	....	....	....	12,579.

9 Enter the state(s) in which the organization operates gaming activities: NJ

a Is the organization licensed to operate gaming activities in each of these states? Yes No

b If 'No,' explain: _____

10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If 'Yes,' explain: _____

11 Does the organization operate gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity operated in:

a The organization's facility	13a	%
b An outside facility	13b	100.0 %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► Teresa A. McGuckin

Address ► % NJIT - University Heights, Newark, NJ 07102

15a Does the organization have a contact with a third party from whom the organization receives gaming revenue? Yes No

b If 'Yes,' enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____

c If 'Yes,' enter name and address of the third party:

Name ► _____

Address ► _____

16 Gaming manager information:

Name ► Michael Wall

Gaming manager compensation ► \$ _____

Description of services provided ► Supervision and mgmt of gaming activity

Director/officer

Employee

Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ 12,153. See Part IV

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (ii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

Schedule G - Additional Information

16. Gaming manager: Mr. Wall was the Executive Vice Chair of the Board of Overseers at Foundation at New Jersey Institute of Technology through March 2014.

17. Mandatory distributions - State of NJ requires 2 matching amounts:

1) \$260 - \$20/\$1,000 of prize value payable to State of NJ - Legalized Games of Chance Control Commission.

2) \$260 - \$20/\$1,000 of prize value payable to the Township of West Orange, NJ, (Licensor for Off Premise Raffle).

3) \$11,633 - Granted to NJIT to provide scholarships to students in accordance with the license requirement, that the entire net proceeds be devoted to provide scholarships to students at NJIT, as indicated in the application.

SCHEDULE I
(Form 990)Department of the Treasury
Internal Revenue Service**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22.
► Attach to Form 990.

OMB No 1545-0047

2013**Open to Public
Inspection**

Name of the organization

Foundation at NJ Institute of TechnologyEmployer identification number
22-1714037**Part I General Information on Grants and Assistance**

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

See Part IV

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) <u>BetaAlphaChptr-Pi Kappa Phi</u> 5 Greek Way Newark, NJ 07102	23-7239202	501 (c) (7)	205,175.	0.			Mortgage pymt-building educ areas
(2) <u>NJ Institute of Technology</u> University Heights Newark, NJ 07102	22-6000910	115 (a) (2)	4,831,761.	532,377.	FMV	Gifts in kind	University programs
(3) _____							
(4) _____							
(5) _____							
(6) _____							
(7) _____							
(8) _____							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

► 1

3 Enter total number of other organizations listed in the line 1 table

► 1

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S.

1) Foundation at New Jersey Institute of Technology monitors the grants made to the

Beta Alpha Chapter of Pi Kappa Phi, Inc., to ensure that they are only used for

construction costs related to educational areas and for the purchase of educational

equipment, educational materials, fire and safety equipment and to provide wireless

internet access of the chapter house.

2) Foundation at New Jersey Institute of Technology reviews all expenditures of grant

funds made by New Jersey Institute of Technology to ensure that the funds are used in

compliance with the grant terms.

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ► Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.
 ► Attach to Form 990. ► See separate instructions.
 ► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

**Open to Public
Inspection**

Name of the organization

Foundation at NJ Institute of Technology

Employer identification number

22-1714037

Part I Questions Regarding Compensation

1 a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

Part III

<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use
<input checked="" type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain

1 b

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?

2

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

Part II

<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract
<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study
<input type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Approval by the board or compensation committee

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:

a Receive a severance payment or change-of-control payment?
 b Participate in, or receive payment from, a supplemental nonqualified retirement plan?
 c Participate in, or receive payment from, an equity-based compensation arrangement?

If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

4 a

4 b

4 c

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization?

5 a

b Any related organization?

5 b

If 'Yes' to line 5a or 5b, describe in Part III

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization?

6 a

b Any related organization?

6 b

If 'Yes' to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III

7

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III

8

9 If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

9

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2013

Part VII Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable columns (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation				
Dees Jr. Charles R 1 President & COO	(i) 0.	0.	0.	0.	0.	0.	0.
Mauermeye, Henry A. 2 Asst Treas&Secr	(i) 0.	0.	0.	0.	0.	0.	0.
Bloom, Joel S. 3 Overseer	(i) 0.	0.	0.	0.	0.	0.	0.
(27) Deek, Fadi 4 Overseer	(i) 0.	0.	0.	0.	0.	0.	0.
(30) Sebastian, Donald H. 5 Overseer	(i) 0.	0.	0.	0.	0.	0.	0.
(36) Fey, Charles J. 6 Overseer	(i) 0.	0.	0.	0.	0.	0.	0.
7	(i)						
8	(i)						
9	(i)						
10	(i)						
11	(i)						
12	(i)						
13	(i)						
14	(i)						
15	(i)						
16	(i)						

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, for Part II. Also complete this part for any additional information.

Part I, Line 1a - Relevant Information Regarding Compensation Benefits

Joel S. Bloom, Overseer of Foundation at New Jersey Institute of Technology

(Foundation) and President of New Jersey Institute of Technology was accompanied by

his wife as an official representative of the Foundation for various fundraising and cultivation activities.

Part I, Line 3 - Methods Used By Related Org. To Establish CEO/Exec. Dir. Compensation

Compensation of the President of Foundation at New Jersey Institute of Technology is established by New Jersey Institute of Technology, the employer of record.

Compensation levels are established within competitive ranges determined via comparison with other similar organizations and local market conditions.

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No 1545-0047

2013

**Open To Public
Inspection**

Name of the organization

Foundation at NJ Institute of Technology

Employer identification number

22-1714037

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art – Works of art				
2 Art – Historical treasures				
3 Art – Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities – Publicly traded	X	21	705,742	FMV
10 Securities – Closely held stock				
11 Securities – Partnership, LLC, or trust interests				
12 Securities – Miscellaneous				
13 Qualified conservation contribution – Historic structures				
14 Qualified conservation contribution – Other				
15 Real estate – Residential				
16 Real estate – Commercial				
17 Real estate – Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (Software License _____)	X	1	472,416	FMV
26 Other ► (Academic support _____)	X	3	58,631	FMV
27 Other ► (Events support _____)	X	9	10,777	FMV
28 Other ► () ..				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement			29	

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

b If 'Yes,' describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If 'Yes,' describe in Part II.

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

See Part II

	Yes	No
30a	X	
31	X	
32a	X	

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Part I, Line 32 - Hire and Use of Third Parties

Foundation at New Jersey Institute of Technology uses the services of Wells Fargo

Advisors, LLC, to process all gifts of marketable securities.

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

- Attach to Form 990 or 990-EZ.
- Information about Schedule O (Form 990 or 990-EZ) and its instructions is
at www.irs.gov/form990.

OMB No. 1545-0047

2013**Open to Public
Inspection**

Name of the organization

Foundation at NJ Institute of Technology

Employer identification number

22-1714037

Form 990, Part V, Line 4b - Financial Account(s) in Foreign CountriesCayman Islands and Bermuda.**Form 990, Part III, Line 4d - Other Program Services Description**Research and program grants totaling \$314,213 were awarded to New Jersey Institute
of Technology to support various research projects conducted by research faculty.Academic support grants totaling \$308,043 were awarded to New Jersey Institute of
Technology to support Deans and other academic activities.Student service grants totaling \$241,634 were awarded to New Jersey Institute of
Technology in support of its student service programs, including athletic program
grants of \$129,632, theater program grants of \$87,239, and other program grants of
\$24,763.Grants totaling \$207,675 (\$205,175 and \$2,500, respectively) were awarded to the
Beta Alpha Chapter of Pi Kappa Phi, Inc. and Alpha Rho Chapter of Alpha Sigma
Phi, Corp., student fraternity organizations, to assist with the payment of mortgages
associated with the construction and furnishing of educational areas of their
Chapter Houses.Construction grants totaling \$100,000 were awarded to New Jersey Institute of
Technology to support renovations for a Smart Classroom and Innovation Lab.Institutional support grants totaling \$2,968 were awarded to New Jersey Institute of
Technology to support public relations and other activities.

Name of the organization

Foundation at NJ Institute of Technology

Employer identification number

22-1714037

Form 990, Part VI, Line 11b - Form 990 Review Process

Form 990 is reviewed by the Assistant Treasurer and Secretary of Foundation at New Jersey Institute of Technology's (Foundation) Board of Overseers. A copy of the Form 990 is provided to all members of the Audit and Finance Committee of the Foundation's Board of Overseers prior to its filing.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Annually there is an outreach to all officers and overseers to have them disclose interests that could give rise to conflicts.

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO, Top Management

Compensation of the President of Foundation at New Jersey Institute of Technology is established by New Jersey Institute of Technology, the employer of record.

Compensation levels are established within competitive ranges determined via comparison with other similar organizations and local market conditions.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

Compensation of the Assistant Treasurer and Secretary of Foundation at New Jersey Institute of Technology is established by New Jersey Institute of Technology, the employer of record. Compensation levels are established within competitive ranges determined via comparison with other similar organizations and local market conditions.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Foundation at New Jersey Institute of Technology makes its governing documents, conflict of interest policy, and financial statements available to the public upon written request.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

- Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
 - Attach to Form 990. ► See separate instructions.
- Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

**Open to Public
Inspection**

Name of the organization

Foundation at NJ Institute of Technology

Employer identification number

22-1714037

Part I Identification of Disregarded Entities Complete if the organization answered 'Yes' on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) _____					
(2) _____					
(3) _____					

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Sec 512(b)(13) controlled entity?
						Yes
						No
(1) New Jersey Institute of Technology 323 Martin Luther King Jr. Blvd Newark, NJ 07102-1982	Public Research University	NJ	115(a) (2)		N/A	X
(2) _____						
(3) _____						
(4) _____						

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership		(i) Sec 512(b)(13) controlled entity?
							Yes	No	
(1)									
(2)									
(3)									

Part V Transactions With Related Organizations Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity.

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s).

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unre- lated, excluded from tax under section 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													

Part VII Supplemental Information

Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions).

2013

Schedule A, Part IV - Supplemental Information

Page 5

Client FDN001

Foundation at NJ Institute of Technology

22-1714037

5/14/15

03:23PM

Part II, Line 10 - Other Income

<u>Nature and Source</u>	<u>2013</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
Fundraising event revenue	\$ 119,611.	\$ 136,441.	\$ 90,752.	\$ 165,914.	\$ 105,377.
Gaming - raffle revenue	27,200.				
Total	<u>\$ 146,811.</u>	<u>\$ 136,441.</u>	<u>\$ 90,752.</u>	<u>\$ 165,914.</u>	<u>\$ 105,377.</u>

2013

Schedule D, Part XIII - Supplemental Information

Page 5

Client FDN001

Foundation at NJ Institute of Technology

22-1714037

5/14/15

03:23PM

**Schedule D, Part XI, Line 4b
Other Revenue Included On Form 990 But Not Included In F/S**

Fundraising event direct expenses	\$ -323,754.
Gaming expenses	-14,621.
Interest alloc to annuity liability	58,319.
Realized gain alloc to annuity liability	105,886.
Total	\$ <u>-174,170.</u>

**Schedule D, Part XII, Line 2d
Other Expenses And Losses Per Audited F/S**

Fundraising event direct expenses	\$ 323,754.
Gaming expenses	14,621.
Total	\$ <u>338,375.</u>

**Schedule D, Part XII, Line 4b
Other Expenses Included On Form 990 But Not Included In F/S**

Invest fees allocate - annuity liability	\$ 28,323.
Total	\$ <u>28,323.</u>

2013

Schedule G, Part IV - Supplemental Information

Page 4

Client FDN001

Foundation at NJ Institute of Technology

22-1714037

5/14/15

03:23PM

**Part III, Line 17b
Distributions Required Under State Law**

\$	11,633.
	260.
	260.
Total \$	<u>12,153.</u>

2013

Schedule O - Supplemental Information

Page 1

Client FDN001

Foundation at NJ Institute of Technology

22-1714037

5/14/15

03:23PM

Form 990, Part XI, Line 9

Other Changes In Net Assets Or Fund Balances

Decrease for int/div alloc to annuity liab ..	.....	\$ -58,319.
Decrease for realized gain alloc to annuity liab ..	.....	-105,886.
Decrease for unrealized gain alloc to annuity liab ..	.....	-440,797.
Increase inv fees allocated to annuity liab ..	.....	28,323.
Total	\$	<u><u>-576,679.</u></u>

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see **Instructions**

Type or print File by the extended due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions Foundation at NJ Institute of Technology	Employer identification number (EIN) or 22-1714037
	Number, street, and room or suite number. If a P O box, see instructions New Jersey Institute of Technology 323 Martin Luther King Blvd	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions Newark, NJ 07102	

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in care of ► William S. Garcia, Telephone No. ► 973-596-5279 Fax No. ► 973-596-1528
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ► . If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension is for

- I request an additional 3-month extension of time until 5/15, 20 15.
- For calendar year , or other tax year beginning 7/01, 20 13, and ending 6/30, 20 14.
- If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period
- State in detail why you need the extension . We respectfully request additional time to gather information necessary to file a complete and accurate tax return.

8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a \$
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b \$
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c \$

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature St. Martin Jr Title ► **Asst Treasurer&Secr**
BAA

FIFZ0502L 12/31/13

Date ► **2/16/15**
Form 8868 (Rev 1-2014)